Image# 14970810812 PAGE 1 / 11

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	Totalor man zar za	utilonzea committee	Office	Use Only
NAME OF TOO COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typing, typ over the lines.	e 12FE4M5	
HCA INC. GOOD GOVE	ERNMENT FUND			
ADDRESS (number and street)	PO BOX 550			
Check if different	ONE PARK PLAZA			
than previously reported. (ACC)	NASHVILLE		TN 372	203
2. FEC IDENTIFICATION NUM	MBER ▼	CITY A	STATE A	ZIP CODE ▲
C C00067231	3.	IS THIS REPORT X NEW (N)	OR AMENDE	ED
4. TYPE OF REPORT (Choose One)	(b) Monthly Feport Due On:	Feb 20 (M2) May 20		Year Only)
(a) Quarterly Reports:		Mar 20 (M3) Jun 20		Year Only)
April 15 Quarterly Report (Q1)		Apr 20 (M4) Jul 20		
July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election Report for the	Primary (12P) Convention (12C)	General (12G) Special (12S)	Runoff (12R)
October 15 Quarterly Report (Q3)	·	. Convention (120)	Opeolai (120)	
January 31 Year-End Report (YE)	Ele	ction on	/	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the	` '	Runoff (30R)	Special (30S)
Termination Report (TER)	·	ction on	/	in the State of
5. Covering Period 08	01 201			2014
I certify that I have examined this	Report and to the best	of my knowledge and belief i	t is true, correct and comp	olete.
Type or Print Name of Treasurer	David Anderson			
Signature of Treasurer David A	Anderson	[Electronically Filed]		/ Y Y Y Y Y 1 Y 16 2014
NOTE: Submission of false, erroneo	us, or incomplete informa	ation may subject the person sig	ning this Report to the pena	alties of 2 U.S.C. §437g.
Office Use Only			FE	EC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

HCA INC. GOOD GOVERNMENT FUND

80 2014 08 2014 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 422340.08 January 1, 2014 (b) Cash on Hand at 299867.61 Beginning of Reporting Period..... 14808.63 6457.76 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 306325.37 437148.71 6(a) and 6(c) for Column B)..... 1178.45 132001.79 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of

Reporting Period

Schedule C and/or Schedule D)

Debts and Obligations Owed BY
 the Committee (Itemize all on Schedule C and/or Schedule D)



305146.92

305146.92

X

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

HCA INC. GOOD GOVERNMENT FUND

m:	4610.00 1845.00 6455.00 0.00 6455.00 0.00 0.00	9245.00 9245.00 5522.95 14767.95 0.00 14767.95
	1845.00 6455.00 0.00 0.00 6455.00	5522.95 14767.95 0.00 0.00
	1845.00 6455.00 0.00 0.00 6455.00	5522.95 14767.95 0.00 0.00
	1845.00 6455.00 0.00 0.00 6455.00	5522.95 14767.95 0.00 0.00
	6455.00 0.00 0.00 6455.00	14767.95 0.00 0.00
	0.00 0.00 6455.00 0.00	0.00
	0.00 6455.00 0.00	0.00 14767.95
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	0.00	
		0.00
		0.00
	0.00	0.00
	0.00	0.00
	0.00	0.00
	2.76	40.68
vin Funds		
	0.00	0.00
	0.00	2.00
	0.00	0.00
8(b))	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	II. Disbursements COLUMN A Total This Period			
Operating Expenditures: —	Total Tillo I Cilod	Calendar Year-to-Date		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) New Feetwal Olever	0.00	0.00		
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00		
Expenditures	178.45	1501.79		
(c) Total Operating Expenditures				
(add 21(a)(i), (a)(ii), and (b)) ▶	178.45	1501.79		
Transfers to Affiliated/Other Party	2.22	0.00		
Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	1000.00	130500.00		
Independent Expenditures	0.00	0.00		
(use Schedule E)	3.00	0.00		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other				
Than Political Committees	0.00	0.00		
		0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(3001 43 1 703)	3.00			
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
01 511		0.00		
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
(ii) III ovinii Chara	0.00	0.00		
(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	7 7		
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add				
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1178.45	132001.79		
,,,,,,,,,,	1110.40	132001.78		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)	1000	100001 =0		
from Line 31)	1178.45	132001.79		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	6455.00	14767.95
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6455.00	14767.95
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	178.45	1501.79
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	178.45	1501.79

Use separate schedule(s) for each category of the Detailed Summary Page

FOF	PAGE	=	6	OF	11				
(check only one)									
X	11a		11b		11c		12	2	
	13		14		15		16	6	17

or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNMEN	IT FUND	
۹.	Full Name (Last, First, Middle Initial) Patricia Bridenstine Mailing Address 8660 45th Street		Date of Receipt
	City	State Zip Code CA 92509	08 15 2014 Transaction ID : SA11AI.30009
	Riverside FEC ID number of contributing federal political committee.	CA 92509	Amount of Each Receipt this Period 400.00
	Name of Employer Riveside Community Hospital Receipt For:	Occupation Director	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
3.	Full Name (Last, First, Middle Initial) Debbie Gafford Mailing Address 12804 W 132nd Street		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Overland Park	State Zip Code KS 66213	Transaction ID : SA11AI.30015 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Menorah Medical Center	Occupation CFO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
-	Full Name (Last, First, Middle Initial) Raju Iyer		Date of Receipt
	Mailing Address 5240 Birkdale Way	7. 0. 1	08 15 2014
	City San Jose	State Zip Code CA 95138	Transaction ID: SA11AI.30003 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Regional Med Ctr San Jose Receipt For: Primary General Other (specify) ▼	Occupation CFO Aggregate Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)		1000.00
т	OTAL This Period (last page this line number of	nly)	

Use separate schedule(s) for each category of the Detailed Summary Page

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or for commercial purposes, other than using	the name and address of any political committee to	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNIN	MENT FUND	
Full Name (Last, First, Middle Initial) A. Michael Johnson		Date of Receipt
Mailing Address 1539 Ravewood Drive		08 15 2014
City	State Zip Code	Transaction ID : SA11AI.30002
San Jose	CA 95138	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Regional Med Ctr San Jose	Occupation CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) 3. Denise Miller		Date of Receipt
Mailing Address 18267 Aberdeen St		08 28 _2014 _
City	State Zip Code	Transaction ID : SA11AI.30026
Stilwell	KS 66085	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Menorah Medical Center	Occupation CMO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. James (RMCA) Miller		Date of Receipt
Mailing Address 2810 Ambassador Caffery	Pkwy	08 15 2014
City	State Zip Code	Transaction ID : SA11AI.30010
Lafayette	LA 70526	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer		
Regional Med Ctr Acadiana	CFO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)	1550.00
TOTAL This Period (last page this line num	ber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

ı	FOR	LINE N	PAGE		8	OF		11		
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name and address of any political committee to	solicit contributions from such committee.
NT FUND	
	Date of Receipt
	08 15 _ 2014 _
State Zip Code	Transaction ID : SA11AI.30012
FL 33317	Amount of Each Receipt this Period
С	30.00
Occupation	
CFO	
Aggregate Year-to-Date ▼	
210.00	
	Date of Receipt
	08 28 2014
	Transaction ID : SA11AI.30038
FL 33317	Amount of Each Receipt this Period
С	30.00
Occupation CFO	
Aggregate Year-to-Date ▼ 240.00	
	Date of Receipt
	08 28 2014
State Zip Code	Transaction ID : SA11AI.30030
KS 66220	Amount of Each Receipt this Period
C	500.00
Occupation	
CNO	
Aggregate Year-to-Date ▼	
500.00	
	560.00
only)	
	State Zip Code FL 33317 C Occupation CFO Aggregate Year-to-Date ▼ 210.00 State Zip Code FL 33317 C Occupation CFO Aggregate Year-to-Date ▼ 240.00 State Zip Code FL 33317 C Occupation CFO Aggregate Year-to-Date ▼ 240.00 C Occupation CNO Aggregate Year-to-Date ▼

Use separate schedule(s) for each category of the Detailed Summary Page

FOI	PAGE	=	9	OF	11				
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or	for commercial purposes, other than using the	name and address of any political committee to	solicit contributions from such committee.
$\left. \right\rangle$	NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNMEN	NT FUND	
A.	Full Name (Last, First, Middle Initial) Steven Wilkinson Mailing Address 5721 West 119th Street		Date of Receipt
	City Overland Park	State Zip Code KS 66209	08 28 2014 Transaction ID : SA11AI.30037 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Menorah Medical Center Receipt For:	Occupation President & CEO	
	Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) Sandy Yanko Mailing Address 225 N Jackson		Date of Receipt
	City San Jose	State Zip Code CA 95116	08 15 2014 Transaction ID : SA11AI.30007 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Regional San Jose	Occupation COO	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
 с.	Full Name (Last, First, Middle Initial)		Date of Receipt
	Mailing Address		M = M / D = D / Y = Y = Y
	City	State Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	
	Name of Employer	Occupation	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional)		1500.00
Т	OTAL This Period (last page this line number of	only)	4610.00

S ľ

SC	CHEDULE B (FEC Form 3X)		F05 · ···-	FOR LINE NUMBER: PAGE 10 OF 11		
ITEMIZED DISBURSEMENTS		Use separate schedule(s		FOR LINE NUMBER: PAGE 10 OF 11 (check only one)		
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		Detailed Summary Page	27		o Ob	
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or	for commercial purposes, other than using the name	e and address of any poli	tical committee to	solicit contributions from such committee.	_	
	NAME OF COMMITTEE (In Full)					
$ \rangle$	HCA INC. GOOD GOVERNMENT	FUND				
_	F. II.N		· · · · · · · · · · · · · · · · · · ·		_	
	Full Name (Last, First, Middle Initial)			Data of Distance and		
A.	Suntrust Bank	Date of Disbursement				
	NA W. All Son Consultation	M M / D D / Y Y Y Y				
	Mailing Address P.O. Box 622227			08 20 2014		
	City S	State Zip Code			_	
	Orlando	FL 32862-2227		Transaction ID : SB21B.30046		
	Purpose of Disbursement	32002 2227				
	. 4.,5555 5. 2.554.55			Amount of Each Disbursement this Period		
	Candidate Name			Timodin of Eddin Diodalosman timo i onod	i	
			Category/ Type	178.45	ı	
	Office Sought: House Disbursen	nent For:	Туре			
		Primary General				
	President	Other (specify)				
	State: District:	• (op •)				
_	Full Name (Last, First, Middle Initial)				_	
В.	Tuli Name (East, Thist, Middle miliar)			Date of Disbursement		
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	Mailing Address			M - M / D - D / Y - Y - Y - Y		
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	City 5	State Zip Code			_	
	Purpose of Disbursement					
				Amount of Each Disbursement this Period		
	Candidate Name		Category/			
			Туре			
	Office Sought: House Disbursen	nent For:				
		Primary General				
		Other (specify) ▼				
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C.				Date of Disbursement		
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	City					
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		Primary General				
	President	Other (specify) ▼				
	State: District:	· · · · · · · · · · · · · · · · · · ·				
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ء	UBTOTAL of Disbursements This Page (optional)			178.45		
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۱,	OTAL This Period (last page this line number only)			178.45		

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the for each category of the purpose of solicitions and Statements may not be sold or used by any person for the purpose of solicitions contributions from such reports and Statements may not be sold or used by any person for the purpose of solicitions from such committee. NAME OF COMMITTEE (in Fill) HCA INC. GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) PRAIRIE POLITICAL ACTION COMMITTEE Mailing Address P.O. BOX 2002 City State Zp Code IL 62705 Purpose of Disbursement Candidate Name Office Sought: President Primary General Purpose of Disbursement Candidate Name Office Sought: President Other (specify) ▼ State: District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type 1000.00 Date of Disbursement this Period Category/ Type Transaction ID: SB23.30043 Amount of Each Disbursement this Period Category/ Type Office Sought: President Other (specify) ▼ Date of Disbursement this Period Category/ Type Office Sought: President Other (specify) ▼ State: District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: President Other (specify) ▼ State: District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Office Sought: President Disbursement For: Primary General District	•	for each category of the	TOTT EINE NOMBETT:	
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r for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in High) HCA INC. GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) PRAIRIE POLITICAL ACTION COMMITTEE Mailing Address P.O. BOX 2002 City State Zip Code IL 62705 Purpose of Disbursement Other (spacify) ▼ State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Candidate Name Category/ Type Office Sought: House President Other (spacify) ▼ State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Candidate Name Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement Candidate Name Category/ Type Date of Disbursement Candidate Name Category/ Type Date of Disbursement Candidate Name Date of Disbursement Candidate Name Category/ Type Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Dispursement Candidate Name Category/ Type Dispursement Category/ Type Dispursement Category/ Type Dispursement Amount of Each Disbursement this Period Category/ Type Dispursement Date of Disbursement this Period Category/ Type Dispursement Dispurs		Detailed Summary Page	27	
NAME OF COMMITTEE (In Full) HCA INC. GOOD GOVERNMENT FUND Full Name (Last, First, Middle Initial) Prings of Disbursement Candidate Name Category/ Type Disbursement Candidate Name Category/ Type Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement this Period Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period District: Date of Disbursement this Period Date of Disbursement this Period Category/ Type Date of Disbursement this Period District: Date of Disbursement this Period District: Date of Disbursement this Period District: Date of Disbursement Date of Disburseme	Any information copied from such Reports and Staten	nents may not be sold or use	d by any perso	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) PRAIRIE POLITICAL ACTION COMMITTEE Mailing Address P.O. BOX 2002 City State Zip Code IL 62705 Purpose of Disbursement Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) Date of Disbursement Category' Type Category' Type Disbursement Category' Type Date of Disbursement this Period Category' Type Date of Disbursement this Period Amount of Each Disbursement this Period Category' Type Date of Disbursement Category' Type Date of Disbursement Category' Type Date of Disbursement Date of Disbursement this Period Amount of Each Disbursement this Period Category' Type Date of Disbursement this Period Date				
Full Name (Last, First, Middle Initial) PRAIRIE POLITICAL ACTION COMMITTEE Mailing Address P.O. BOX 2002 City State Zip Code IL 62705 Purpose of Disbursement Contribution Cardidate Name Office Sought: House Period Disbursement For: Senate Primary General Disbursement For: District Full Name (Last, First, Middle Initial) Date of Disbursement This Period Amount of Each Disbursement this Period Category' Type Office Sought: House Senate Primary General Disbursement For: District Full Name (Last, First, Middle Initial) Date of Disbursement This Period Amount of Each Disbursement This Period Category' Type Office Sought: House Disbursement For: District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Amount of Each Disbursement this Period Category' Type Other (specify) Amount of Each Disbursement this Period Category' Type Office Sought: House Primary General Disbursement For: Category' Type Office Sought: House Purpose of Disbursement For: District Full Name (Last, First, Middle Initial) Date of Disbursement Amount of Each Disbursement this Period Category' Type Office Sought: House Primary General Disbursement For: District Date of Disbursement Disbursement Disburse				
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Mailing Address P.O. BOX 2002 City State Zip Code IL 62705 Purpose of Disbursement Contribution Candidate Name City State Zip Code President President State: District: Ful Name (Last, First, Middle Initial) Office Sought: House President Primary General Office Sought: House President Primary General Office Sought: House President Primary General Office Sought: House Primary General Office Sought:		MMITTEE		Date of Disbursement
Mailing Address P.O. BOX 2002 State Zip Code R. State Zip Code R. State R.	THANKE TO SETTIONE NOTION COMMITTEE			M M / D D / Y Y Y Y
SPRINGFIELD Purpose of Disbursement Candidate Name City Senate President Candidate Name City Senate President Candidate Name City Senate President Category/ Type Disbursement Category/ Type Date of Disbursement this Period Category/ Type Date of Disbursement Category/ Type Date of Disbursement Category/ Type Date of Disbursement Category/ Type Amount of Each Disbursement Date of Disbursement Category/ Type Date of Disbursement Category/ Type District: District: District: District: District: District: District: District:	Mailing Address P.O. BOX 2002		08 14 2014	
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